



FORM 2 NOTIFICATION OF DANGEROUS WASTE ACTIVITIES

Washington State Department of Ecology
Attn: DW Notifications
P.O. Box 47658
Olympia, WA 98504-7658
(360) 407-6737

Date Received: **APR 06 2000**

Note: Failure to properly and completely fill out your form may delay processing and/or cause your form to be returned for completion. Associated page numbers with detailed instructions are listed for each section.

1. Notification. Please select one of the following choices. (p.5)

1.a. ☐ New notification

OR 1.b. ☒ Existing RCRA Site ID# WAD 988 473 633

if 1.a., complete entire form

if 1.b., choose desired action below and fill in effective date.

☐ Revise Notification (complete entire form)

Indicate which sections are being revised _____

☐ Reactivate Site ID# (complete entire form)

☒ Withdraw/Cancel Site ID# (skip sections 9 and 10)

Effective date of change: 12/31/1999
mm dd yyyy

DEPARTMENTAL USE ONLY									
WA									

2. Site Information (p.7)

Company Name BMW Seattle

Site Location 715 E Pike

City/State/Zip Seattle, Wa 98122

County King

Revenue Number 601 213 494

SIC Code 5511 Type of business Automotive Dealers

3. Company Mailing Address (p.7)

Name BMW Seattle

Address 714 E Pike St.

City/State/Zip Seattle Wa 98122

4a. Legal Owner of this site (p.7)

Name Norman Enterprises Inc

Mailing Address 714 E Pike St

City/State/Zip Seattle Wa 98122

Phone (206) 328-8787 ext _____

Owner Since 1993

4b. Legal Ownership Type

Please Circle

F = Federal S = State

I = Tribal Trust P = Private

C = County M = Municipal

D = District O = Other

5a. Land Owner of this site (p.8)

Name Norman Enterprises Inc

Mailing Address 714 E Pike St

City/State/Zip Seattle Wa 98122

Phone (206) 328-8787 ext _____

5b. Land Ownership Type

Please Circle

F = Federal S = State

I = Tribal Trust P = Private

C = County M = Municipal

D = District O = Other

RCRA Site ID # (p.5) WAD 988 473 633

Name of site (same as section 2) BMW Seattle

6. Site Contact for visits and inspections (p.8)

Name/Title Patrick Hennessey - Service Manager

Mailing Address 714 S Pike St

City/State/Zip Seattle Wa 98122

Phone (206) 328-2300 ext _____

7. Forms Contact for notifications and annual reports (p.8)

Name/Title Patrick Hennessey - Service Manager

Mailing Address 714 E Pike St

City/State/Zip Seattle Wa 98122

Phone (206) 328-2300 ext _____

8. Site Operator responsible for dangerous waste activity (p.8)

Name/Title Patrick Hennessey

Mailing Address 714 E Pike St

City/State/Zip Seattle Wa 98122

Phone (206) 328-2300 ext _____

9. Hazardous Waste Generator Status and Activities

Indicate the facility's generator status by checking the appropriate boxes below.

9.a. Dangerous waste activity (p.8-11)

1. Generator

- ☐ a. Greater than 2,200 lbs
☐ b. 220-2,200 lbs
☐ c. Less than 220 lbs

2. Frequency

- ☐ a. Monthly
☐ b. Batch
☐ c. One-Time Only

3. Transporter (indicate mode in boxes 1-5 below).

- ☐ a. Transport own waste
☐ b. Transport for commercial purposes

Mode of Transportation

- ☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other-specify: _____

4. Treater, Storer, Disposer (at installation). Note: A RCRA Permit is required for this activity.

- ☐ a. For waste generated at this facility.
☐ b. For waste generated by other facilities

5. Dangerous waste fuel

- ☐ a. Generator marketing to burner.
☐ b. Other marketers
☐ c. Boiler and/or industrial furnace

- ☐ 1. Smelter deferral
☐ 2. Small quantity exemption

Indicate type of combustion device(s):

- ☐ 1. Utility boiler
☐ 2. Industrial boiler
☐ 3. Industrial furnace

- ☐ 6. Immediate recycler
☐ 7. Permit by Rule facility
☐ 8. Treatment by Generator
☐ 9. Mixed Radioactive
☐ 10. LQHUW (Large Quantity Handler of Universal Waste)
☐ a. Batteries
☐ b. Mercury containing thermostat

9.b. Used oil fuel activities (p.11-12)

Used oil fuel marketer

- ☐ a. Marketer directs shipment of used oil to off-specification burner.
☐ b. Marketer who first claims the used oil meets the specifications

1. Used oil burner—indicate type(s) of combustion device(s).

- ☐ a. Utility boiler
☐ b. Industrial boiler
☐ c. Industrial furnace

2. Used oil transporter—indicate type(s) of activity(ies).

- ☐ a. Transporter
☐ b. Transfer facility

3. Used oil processor/re-refiner—indicate type(s) of activity(ies).

- ☐ a. Process
☐ b. Re-refine

RCRA Site ID # (p.5) WA0 988 473 633

Name of site (same as section 2) BMW Seattle

10a. Waste Description (p.12)

10b. Waste Codes: (p.12-13)

1. Listed (WAC 173-303-9903, and 9904): Fill in those codes that best describe your waste(s).

2. Characteristics (WAC 173-309-090): Identify (circle or fill in) those codes that best describe your waste(s).

D001	D002	D003	TCLP
Ignitable	Corrosive	Reactive	_____

3. State-only (WAC 173-303-100, -180): Circle those codes that best describe your waste(s).

WT01 WT02	WP01 WP02 WP03	WL01 WL02	W001	WSC2
Toxic	Persistent	Labpack	PCB	Solid Corrosive

11. Comments (p.13)

Removed old Solvent tanks, brought in solvent tanks that have recyclable solvent in the machine.

12. Notification checklist (p.13)

- ☒ Did you sign and date the notification form?
- ☒ Did you keep a copy for your files?
- ☒ Did you complete the correct sections of this notification form to fit your situation? (See section 1 - Notification).
- ☒ If you are Withdrawing/Canceling your RCRA Site ID number, you are responsible for annual reports up to the date your regulated dangerous waste activities ended. Did you submit your completed annual report with this request for Withdraw/Cancel?

13. Certification (p.13) **This form cannot be processed without a signature**

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature

Name and official title (type or print) Date signed

Patrick Hennessy

Patrick Hennessy Service Manager

4-5-00



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

+ WAD988473633

BMW SEATTLE
714 E PIKE
SEATTLE

WA 98122

INSTALLATION ADDRESS

715 E PINE
SEATTLE

WA 98122



ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous waste; on all Annual Reports that generators of hazardous waste and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA ID NUMBER	WA093543833
NAME AND ADDRESS OF INSTALLATION	BMW SEATTLE 714 5 PIKE SEATTLE WA 98122

SEATTLE WA 98122



WASHINGTON STATE
DEPARTMENT OF ECOLOGY

Attn: DW Notifications
M/S PV-11
Olympia, WA 98504-8711
(206) 459-6387

FORM 2

APR 04 1990

WAD988473633

NOTIFICATION OF DANGEROUS WASTE ACTIVITIES

1. ☒ A. FIRST NOTIFICATION

(No previous application has been made for this site)

☐ C. WITHDRAW SITE I.D. NO. DATE

(Complete Sections 1F, 2A, 3, 4-7 & 12. Enter existing I.D. No. in Part 1F)

☐ E. CANCEL SITE I.D. NO. DATE

(Site closed—no longer own or conduct business at this site.
Complete Sections 1F, 2A, 3, 4-7 & 12. Enter existing I.D. No. in 1F)

☐ B. REVISED NOTIFICATION DATE

(Enter existing site I.D. No. in Part 1F. List sections you revised:)

☐ D. REACTIVATE SITE I.D. NO. (Complete all sections of the form.
Enter previously assigned I.D. No. in Part 1F.)

☐ F. EXISTING I.D. NO.

(Complete for items
1B, C, D & E only)

WA

2.A. WASHINGTON STATE DEPARTMENT OF REVENUE REGISTRATION (TAX) NUMBER												2.B. SIC CODE(S)											
601-213-494												5511 PRIMARY SECONDARY OTHER											
3404												6301 4904											
2.C. TYPE OF BUSINESS CONDUCTED AT THIS SITE																							
Automobile Dealership																							
3. NAME OF INSTALLATION																							
BMW SEATTLE																							
4. LOCATION OF INSTALLATION																							
Street																							
715 EAST PINE																							
County Name																							
KING																							
City or Town												State				ZIP Code							
SEATTLE												WA				98122-							
5. INSTALLATION MAILING ADDRESS																							
Street or P.O. Box																							
714 EAST PIKE																							
City or Town												State				ZIP Code							
SEATTLE												WA				98122-							
6.A. INSTALLATION CONTACT																							
Name (last)												(first)											
MALLAND												STEVEN											
Job Title												Phone Number											
DIRECTOR PART-SERV.												206-328-2300											
6.B. INSTALLATION CONTACT MAILING ADDRESS (see instructions)																							
BOX 1 <input checked="" type="checkbox"/> BOX 2 <input type="checkbox"/>																							
Street or P.O. Box																							
City or Town																							
State																							
ZIP Code																							
7.A. NAME OF INSTALLATION'S LEGAL OWNER																							
GRIFFITH/NORMAN ENTERPRISES INC.																							
Street, P.O. Box, or Route Number																							
714 EAST PIKE																							
City or Town												State				ZIP Code							
SEATTLE												WA				98122-							
7.B. PROPERTY OWNERSHIP (If ownership is different than 7.A. provide address in section 11.)																							
7.C. OWNER TYPE																							
7.D. PROPERTY TYPE																							
4/26/90 KICK																							
P																							
P																							

NAME OF INSTALLATION BMW SEATTLE
(Same as Item No. 3)

EPA I.D. NO. _____

8. TYPES OF REGULATED DANGEROUS WASTE ACTIVITIES YOUR BUSINESS IS CONDUCTING (Read & follow instructions for this section carefully—Enter an "X" in any sections of 8.A., 8.B., or 8.C. below that may apply).

8.A. HAZARDOUS WASTE ACTIVITIES (See instructions for definitions of these activities).

- ☒ 1. GENERATOR ☐ 1a. Conduct on-site recycling > 2
- ☐ 2. TRANSPORTER 2a. ☐ Transport Wastes Commercially (for hire).
2b. Modes of Transport: (1) ☐ Highway (2) ☐ Air (3) ☐ Rail (4) ☐ Water (5) ☐ Other (Specify in comments)
- ☐ 3. MANAGEMENT FACILITY (TSD) 3a. ☐ Facility accepts wastes from OFF-SITE Generators.
3b. Process conducted or available at this facility;
(1) ☐ Treatment (2) ☐ Storage (>90 days) (3) ☐ Disposal
(4) ☐ Other (specify in comments).
3c. Current Part A ____/____/____
Part B Process ☐ Yes ☐ No
- ☐ 4. IMMEDIATE RECYCLER
- ☐ 5. PERMIT-BY-RULE FACILITY
- ☐ 6. MARKET OR BURN DANGEROUS WASTE FUELS— 6a. ☐ Generator Marketing to Burner 6b. ☐ Other Marketer
6c. ☐ Burner. (COMPLETE 8c.—TYPE OF COMBUSTION DEVICE)

8.B. USED-OIL FUEL ACTIVITIES.

- ☐ 1. OFF-SPECIFICATION USED-OIL FUELS-1a. ☐ Generator Marketing to Burner 1b. ☐ Other Marketer 1c. ☐ Burner (Complete 8c.)
- ☐ 2. SPECIFICATION USED-OIL FUEL MARKETER (or ON-SITE BURNER) WHO FIRST CLAIMS THE OIL MEETS THE SPECIFICATION.

8.C. DANGEROUS WASTE OR OFF-SPECIFICATION USED-OIL FUEL BURNING: TYPE OF COMBUSTION DEVICE.

(see instructions for definitions of combustion devices) 1. ☐ Utility Boiler 2. ☐ Industrial Boiler 3. ☐ Industrial Furnace.

9. WASTE IDENTIFICATION (Copy this page if you have more than 5 waste streams—other information (sections 8 and 10-12) not needed on continuation sheets)

A. NUMBER	B. DESCRIPTION OF WASTE(S)	C. DANGEROUS WASTE NUMBER (Refer to WAC 173-303)	D. ESTIMATED OR ACTUAL ANNUAL WASTE QUANTITY	E. W E C O D E
1	WASTE PETROLEUM Naphtha MINERAL SPIRITS - PARTS CLEANER SOLVENT	D001	1500	P
2	CRESYLIC ACID Dichlorobenzene METHYLENE CHLORIDE	F002	195	P

10. ESTIMATED MAXIMUM QUANTITY of all wastes, listed above, to be produced in any given month or per processing batch. In 10.D. indicate maximum to be accumulated on-site prior to shipment.

- 10.A. ☒ (Batch Frequency 8 WEEKS)

QUANTITY	WEIGHT																				
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CODE	CODE																				
- 10.B. ☐ PER MONTH

QUANTITY	WEIGHT																				
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CODE	CODE																				
- 10.C. ☐ ONE-TIME-ONLY

QUANTITY	WEIGHT																				
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CODE	CODE																				
- 10.D. AMOUNT TO BE ACCUMULATED ON-SITE PRIOR TO SHIPMENT

QUANTITY	WEIGHT																				
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CODE	CODE																				

11. COMMENTS

LINE 9 - Item #1 = 8 WEEK CYCLE

LINE 9 - Item #2 = 12 WEEK CYCLE

12. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

Steven M. Mallard

NAME AND OFFICIAL TITLE (type or print)

STEVEN M. MALLARD
PARTS/SERVICE DIRECTOR

DATE SIGNED

4-2-90